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APPLICANTS

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** CONTINUING DATA *****



This application is a CIP of PCT/FR02/03790 11/06/2002

** FOREIGN APPLICATIONS *****

FRANCE 01/14415 11/07/2001

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/28/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged  Examiner's Signature	FRANCE	2	7	1
Initials 				

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TITLE

Non-separable attachment for dispensing device

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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